HIA IN WALES: FROM VOLUNTARY TO STATUTORY

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LOCATING WALES
Devolved Government

Emphasis on:

- Health and wellbeing
- Addressing inequalities within population
- Sustainable Development
- Citizen centred public services
- Partnership working
- Integrated agenda

- Devolved Powers include: health, planning, social services and social care
- Ability to legislate for these through Assembly Bills and Acts
IMPORTANCE OF CONSIDERING HEALTH AND WELLBEING

- Wales exhibits high levels of poor health
- Increasing rates of obesity and associated illness ie diabetes, heart disease and respiratory diseases
- Smoking and alcohol
- Inequalities in health - deprived communities exhibit higher levels of ill health and have shorter life expectancy than more affluent communities
- Not just physical health - wider determinants of health and mental wellbeing
HIA AND HIAP IN WALES: STRATEGIC DRIVERS

- Wellbeing of the Future Generations (Wales Act) 2015 - Sustainable Development focus
- Consideration of Health in All Policies (HiAP)
- Our Healthy Future’ (2010) and ‘Fairer Outcomes for All’ (2011) - Public Health Strategy for Wales
- Public Health (Wales) Act 2017 - includes statutory requirement for HIA for public bodies
Many voluntary levers for HIA...

- Planning Bill (2015) and Planning Policy Wales (PPW)
- MTAN2: Coal (2009) - open cast mining. EIAs require a broad HIA to be undertaken
- NHS Infrastructure Investment Guidance (2016)
PUBLIC HEALTH (WALES) ACT 2017

- HIA required in ‘specific circumstances for public bodies’ in Wales
- Public Health Wales (PHW) ‘must provide assistance to those carrying out a HIA’

Details as yet unknown but likely to be:
- Planning related policies and plans
- Major public body services reconfiguration
- Licensing of fast food outlets
- Wellbeing Objectives and statements (WFGA)
Why now? Why successful?

- Window of opportunity in Wales - political and social context
- Health and wellbeing status linked to economic development
- WFGA - Wellbeing Goals inc Health/Equality
- UN Sustainable Development Goals and SD agenda
- Success of HIA in practice at a national/local level and many benefits gained i.e. strengthened plans, community consultation/involvement; avoided unintended consequences
- Strategic advocates created i.e. BMA Cymru, Chartered Institute of Environmental Health (CIEH), Public Health Wales (PHW)
FACTORS WHICH HAVE FACILITATED THIS

- WHIASU - independent specialist unit for HIA
- Training and capacity building i.e. LAs/LPHTs
- Application of HIA/HiAP - strategic work with Welsh Government; ‘non health’ sectors - created ‘champions’ who have benefited
- Pragmatic approach taken i.e. Rapid participatory HIA is time and resource effective and efficient
- Creation of strong partnerships with organisations and individuals
- Case studies/presentations to highlight work - raise awareness of importance of health and wellbeing and HIA role
CHALLENGES FOR THE FUTURE

- Lack of capacity in WHIASU and public health system - new model of working for HIA?
- WG HIA Statutory Regulations - circumstances are as yet to be defined; no definition of assistance...
- Implications of the Act not understood widely - only a few PBs are prepared for the HIA duty
- A whole system approach is needed with joined up working and resources (mirrors the WFGA)
- Austerity
SUMMARY

- Need the right policy context BUT can still influence the successful use of HIA
- Exploit every lever possible to ‘sell’ HIA/HiAP
- Utilise a ‘Top Down’ approach at the same time as a ‘Bottom Up’ one
- Community involvement, avoiding unintended consequences - selling points
- Creation of strategic and local advocates - key
- Role of dedicated specialists to support and provide advice, guidance and resources
- Demonstrate ‘added value’ and evaluate any success
Diolch yn fawr!

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